## APPLICATION FOR RESERVING THE SHELTER

## AT STUART MCBRIDE

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APPLICANT	INFORMATION	
Applicant or Group Name:		
Contact Name:		Date of birth of Renter:
Current address:		
City:	State:	ZIP Code:
Phone:	,	
Dates Requested:		
Hours Requested:		(example: 10 a.m. to 10 p.m.)
Approximate number of people attending:		
	R LICENSES NEEDE	D?
Temporary Class B Picnic License to Serve Beer & Wine (NO Ha		
Bounce House Permit \$15		
Rental Fee (includes tax)	\$100.00	
Security Deposit (Refundable)	\$ 25.00	
Total (Tax is included)	\$125.00	
IF WE RECEIVE		THE VILLAGE RETAINS
WRITTEN CANCELLATION NOTICE OF AT LEAST 30 DAYS PRIOR TO EVENT		10% OF RENTAL FEE
WRITTEN CANCELLATION NOTICE 29 DAYS PRIOR BUT LESS THAN 7 DAYS PRIOR		50% OF RENTAL FEE
WRITTEN CANCELLATION NOTICE 7 DAYS PRIOR		100% OF RENTAL FEE
PAYMENT MUST BE INCLUDED WITH YOUR APPLICATION  Permission is granted and the applicant shown on this application  Park Shelter: To be financially responsible for property and equal to the comply with park rules will result in FORFEIT OF SEC	on hereby agrees to t uipment and agrees t	the following in its use of the Stuart McBride to leave the property clean and undamaged.
Signed:		Date:
WA DO NOT PLUG IN MORE THAN TWO ELECTRICAL APPLIA THE CIRCUITS. DO I		
For office use only		
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Reservation Fee \$		